Department of Health Care Services
Children's Medical Services Network

CMS Net Web

Coverage

Section 45

TABLE OF CONTENTS

1 LIST OF FIGURES

2   DEFINITIONS, ABBREVIATIONS, & ACRONYMS

The following terms, abbreviations, and acronyms may be used in this document:

Term	Definition
CCS	California Children's Services
CIN	Client Identification Number
CMS	Children's Medical Services
CMS Net	CMS Case Management System
CMS Net Legacy	CMS Case Management System – Legacy Application
CMS Net Web	CMS Case Management System – Web Application
DHCS	Department of Health Care Services
GHPP	Genetically Handicapped Persons Program
HCP or HP	Health Care Plan
HFP or HF	Healthy Families Plan
HRIF	High Risk Infant Follow-up
ICD	Int'l Classification of Diseases (Diagnosis/Procedure Code)
Inappropriate Letter	A letter sent to the Provider/Managed Care Plan/HF informing them the referral is incomplete, inaccurate or needs more clarification.
MCP	Managed Care Plan
Medical Home	Client's designated primary care physician and/or the physician who provides a medical home.
MEDS	Medi-Cal Eligibility Data System
MTP	Medical Therapy Program
MTU	Medical Therapy Unit
NICU	Neonatal Intensive Care Unit
PEDI	Provider Electronic Data Interchange
NPI	National Provider Identifier
PMF	Provider Master File (Medi-Cal Provider list)
PSSN	Pseudo Social Security Number
Referral Type	Case or Service
Requestor	Any referral source other than a provider listed in the PMF (Non-PMF provider).
SAR	Service Authorization Request
SCC	Special Care Center
SSN	Social Security Number

3   INTRODUCTION

The Coverage module allows users to store insurance or any other coverage information a client has that may affect eligibility. Coverage screens are broken down into tabs for Insurance, Medi-Cal, Third Party Liability, Healthy Families, and CCS Pilot Project plans.

The Coverage module allows users to:

- View coverage information from the Medi-Cal Eligibility Data Systems (MEDS).
- Create new coverage records in CMS Net directly.
- View all coverage for a client for a given carrier, with one record for each policy and all polices for that carrier grouped within that record.

Changes from Legacy

- Prevent duplicate insurance carriers from being entered on the same case.
- Users will be able to delete any record with the source as CMS.
- Allow multiple start/stop dates for each coverage.   When adding a policy that has a previous start/stop date for the selected client, the historical record will be condensed within the new one. Previously, a separate record was created each time there was a gap in coverage.
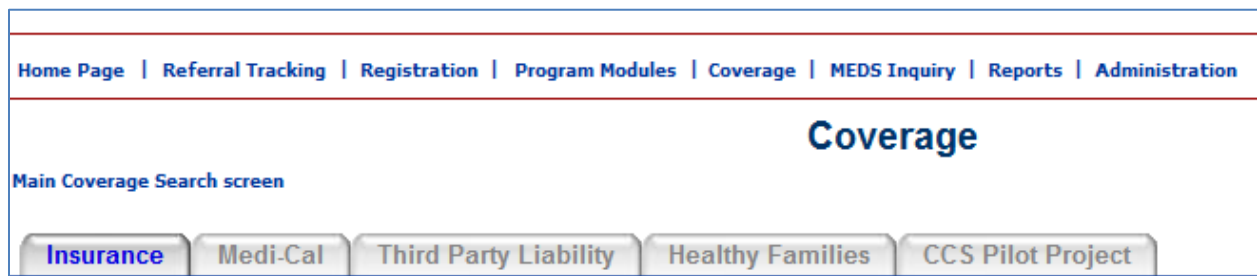
Figure 3-1 - Coverage Menu

4   SEARCH COVERAGE SCREEN

4.1   Search for Client

Figure 4-1 - Search for Client

4.1.1   Last Name

Enter a client's Last Name then press Enter or click Find to select a client.

4.1.2   First Name

Enter a client's First Name and Last Name then press Enter or click Find to select a client. Last Name is required when searching by First Name unless other criteria are entered, such as Gender.

4.1.3   Case

Enter a client's 7 digit case number to select a client with a 1 to 1 match. Legacy cases may be less than 7 digits long and case numbers may eventually be generated that are longer than 7 digits as the client base grows.

4.1.4   CIN

Search for a client using their 9 digit Client Identification Number (CIN). CIN numbers are formatted as 12345678A. This field is limited to 9 digits. CIN numbers may include a 10th character, called a check digit, and may or may not include a leading space. This check digit should be removed when searching by CIN and will be truncated if the full 10 digit number is pasted into the field.

4.1.5   SSN

Search for a client by Social Security Number (SSN) or Pseudo Social Security Number (PSSN), an alternate number issued in lieu of a valid SSN. SSN is a 9 digit number, formatted as 123-45-6789. PSSN is a total of 9 characters long, 8 digits and ends with the letter P, formatted as 123-45-678P.

4.1.6   DOB

Search for a client by Date of Birth (DOB), using the format MM/DD/YYYY or M/D/YY. This field is typically used in combination with the client's name and gender.

4.1.7 Gender

Search for a client by selecting their Gender from the dropdown list. This field is typically used in combination with a name and date of birth. The following selections are available: Male, Female, Not Known

4.1.8 County

Search for a client by selecting their County. This field is typically used in combination with other selections, such as client name, gender and/or date of birth.

4.2 Entered By User Search Fields

ENTERED BY USER

Search User

	Username	Last Name	First Name	County	User Status	
☐				Select ▾	Select ▾	Find

Search Coverage

Figure 4-2 - Entered By User Search Fields

4.2.1 Username

Search for a client by entering in a Username. Note: To prevent large search results, this field must be used in conjunction with one or more fields from the Search Options section.

4.2.2 Last Name

Enter a client's Last Name then press Enter or click Find to select a client.

4.2.3 First Name

Enter a client's First Name and Last Name then press Enter or click Find to select a client. Last Name is required when searching by First Name unless other criteria are entered, such as Gender.

4.2.4 County
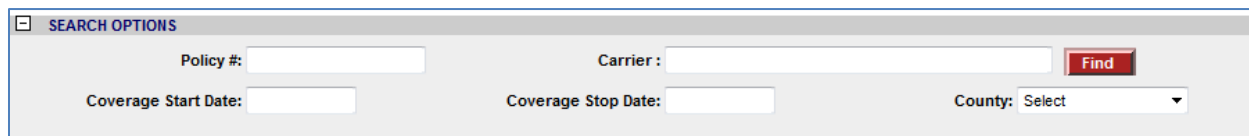
Search for a client by selecting the User's County. This field is typically used in combination with other selections, such as client name, gender and/or date of birth. Note: The County field is filtered to the user's acceptable Counties and is defaulted to the primary office of the user

4.2.5 User Status

Search for a client by selecting their User Status. This field is typically used in combination with other selections, such as client name, gender and/or date of birth.

4.3   Search Options

Maximize search options by clicking on the plus (+) sign button to the left of the Search Options header.   Minimize this section by clicking the minus (-) sign button.

Figure 4-3 - Search Options

4.3.1   Policy

Enter a policy number and then press Enter or click Find to select a client.

4.3.2   Carrier

Carrier Name or the carrier code may be used for searching the carriers on CMS Net. Entering the carrier name or code and clicking on the 'Find' button opens a popup and lists down all the active carriers available.   Note: To prevent large search results, this field must be used in conjunction with one or more fields from the Search for Patient section.

4.3.3   Coverage Start Date

Enter a start date and then press Enter or click Find to select a client. Note: To prevent large search results, this field must be used in conjunction with one or more fields from the Search for Patient section.

4.3.4   Coverage Stop Date

Enter a stop date and then press Enter or click Find to select a client. Note: To prevent large search results, this field must be used in conjunction with one or more fields from the Search for Patient section.

4.3.5   County

Select the County responsible for case management and authorization of services for client. This may differ from Residence County in certain situations, such as fostered children. Note: To prevent large search results, this field must be used in conjunction with one or more fields from the Search for Patient section.

4.4   Navigation Buttons

4.4.1   Find

Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from.   A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

4.4.2   Search Coverage

Performs a search based on criteria entered in Registered by User section. *Contained within the Search Options hidden menu.*

4.4.3   Continue

Performs search based on selected criteria and returns results.

4.4.4   Reset

Clears all criteria previously selected or entered in fields.

5   COVERAGE SEARCH RESULTS SCREEN

5.1   Search Results Fields

Once you have entered search criteria and located the client, you will see the Search – Coverage screen.

5.1.1   Select
Select a client by clicking the check box in the far left column on the row corresponding to the desired client.

5.1.2   Case Number
Unique 7 digit number assigned to a case during registration. Legacy cases may be less than 7 digits long and cases numbers may eventually be generated that are longer than 7 digits as the client base grows.

5.1.3   Client Name
Displays search results by client's full name or alias.

5.1.4   DOB
Displays search results by client's date of birth.

5.1.5   Gender
Indicates if the client is male, female, or the gender is not known.

5.1.6   CIN
Displays search results by Client Identification Number, a unique identification number assigned by Medi-Cal.

5.1.7   SSN
Displays search results by the clients SSN.

5.1.8   County

The Legal County responsible for case management and authorization of services for client. This may differ from Residence County in certain situations, such as fostered children.

5.1.9   Username

Displays search results by results by Username.

5.1.10   User Status

Displays search results by results by User Status.

5.1.11   Policy

Displays search results by policy number and then press Enter or click Find to select a client.

5.1.12   Carrier

Displays search results by carrier.

5.1.13   County

Displays search results by County.

5.1.14   Coverage Start Date

Displays search results by start date.

5.1.15   Coverage Stop Date

Displays search results by stop date.

5.2 Navigation Buttons

5.2.1   Continue

Click the Continue button after selections are made to return to the search screen.

5.2.2   Reset

Clears all criteria previously selected or entered in fields.

6   COVERAGE SCREEN TABS

The Coverage module is divided into five tabs: Insurance, Medi-Cal, Third Party Liability, Healthy Families and CCS Pilot Project. Depending on the client/program, there may be information in more than one coverage tab.
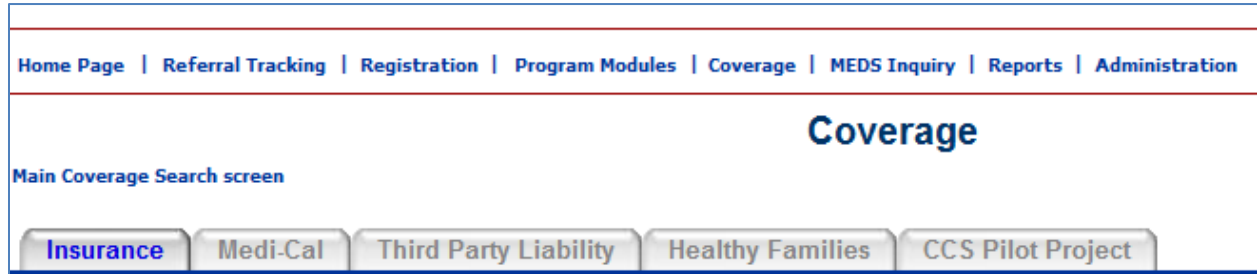

Figure 6-6-1 - Coverage Screen Tabs

7   CLIENT INFORMATION HEADER

The Client Information Header is displayed on various pages in CMS Net and provides a static view of details about a selected client. By default, only basic information is displayed when the header is minimized, but may be expanded by clicking on the plus sign (+) to view details.

7.1   Client Information Header – Basic View

Figure 7-1 - Client Information Header – Basic View

Displayed by default.

7.1.1   Client Name
Client's full name or alias.

7.1.2   Case Number
Unique 7 digit number assigned to a case during registration. Legacy cases may be less than 7 digits long and case numbers may eventually be generated that are longer than 7 digits as the client base grows.

7.1.3   Date of Birth
Client's date of birth.

7.2   Client Information Header – Detailed View

Figure 7-2 - Client Information Header – Detailed View

7.2.1   Alias
Previous names the selected client has used.

7.2.2   Reg Status
Status the case is currently in. Case Statuses are: Active, Closed, Denied, Not Open, Pending, Reopen Pending

7.2.3   Client Elig Status
Current CCS aid code on case.

7.2.4   Application Status
Status the application is currently in. Application Statuses are: 1st Letter Sent, 2nd Letter Sent, Third Letter Sent, No Action, Signed App

7.2.5   CIN
Currently assigned Client Identification Number, a unique identification number assigned by Medi-Cal.

7.2.6   Program Begin Date
Begin Date of current program eligibility period.

7.2.7   Diagnostic Only
Indicates if client is eligible for Diagnostic Only and not eligible for Treatment.

7.2.8   Gender
Indicates if the client is male, female, or the gender is not known.

7.2.9   Program End Date
End Date of current program eligibility period.

7.2.10   PSA Status
Status the PSA is currently in. PSA Statuses are: Signature Pending, Not Required, Not Signed, Signed

7.2.11   Language
Specifies primary language spoken by client.

7.2.12   Medical Elig Status
Indicates client's CCS medical eligibility. Populated from Medical Eligibility screen in Eligibility. Medical Elig Statuses are: Eligible, Ineligible

7.2.13   Caseload Code
Organizational unit within the county to which the case is assigned.

7.2.14   County
Legal County responsible for case management and authorization of services for client. May differ from Residence County in certain situations, such as fostered children.

7.2.15   Financial Elig Status

Indicates client's CCS financial eligibility. Populated from Financial Worksheet in Eligibility. Financial Elig Statuses are: Eligible, Ineligible, Pending

7.2.16   County Case Manager

Currently assigned case manager.

7.2.17   Medi-Cal Number

A 14 digit dynamic number assigned by Medi-Cal which is calculated based on information derived from MEDS, such as county, aid code, etc. This number may change after a MEDS Inquiry or Recon is run.

7.2.18   Residential Elig Status

Indicates client's CCS residential eligibility. Populated from Residential Worksheet in Eligibility. Residential Elig Statuses are: Eligible, Ineligible, Pending

7.2.19   Temporary Caseload

An organizational unit to which a case is temporarily assigned. When a permanent caseload is assigned, the value No will be displayed. Options are: Yes, No

7.2.20   MTU Name

Name of currently assigned Medical Therapy Unit. This name is assigned within the MTP module of CMS Net Web.

8 INSURANCE SCREEN

The Insurance Screen includes private insurance information specific to a client. Results can be obtained by user entry, or through a MEDS Recon monthly update. If a user has manually entered insurance and the client becomes "Active" this information is sent to MEDS and posted on the Health Insurance Segment (HIS) to assist in post payment recovery and cost avoidance.

Insurance records are sorted by Start Date in descending order, and a policy's historical dates are collapsed within the most recent record. These coverage records are displayed collapsed by default. A plus sign next to the Carrier Name will indicate that this is a collapsed record and can be clicked to expand the selection.

If there is only one coverage record on the screen, it will be selected by default. Otherwise, no record will be selected.

8.1   Insurance Screen - Basic View

Figure 8-1 - Insurance Screen

8.1.1   Carrier Name

Carrier Name data from Carrier Master File. When Carrier is selected, Code and Type are auto-populated. The Find button utilizes the Carrier search popup to provide a filtered list of Carriers based on the name entered. The search results in the list of active carriers whose name starts with the entered text and of private insurance type. A carrier code can also be entered in this field to search for a carrier since Code is a display only field.

When a 1 to 1 match is found by pressing the Enter key, the selection is auto-populated on the Coverage Details section. When the find button is used or there are multiple matches, a popup is presented for selection. *Required field.*

Note: If the desired carrier is not found when searching, it may be added using the OHC Processing Center Forms located at:

http://www.dhcs.ca.gov/services/Pages/TPLRD_OCU_cont.aspx

8.1.2   Code
System displays the Carrier Code associated with the insurance carrier. When Carrier is selected, Code, and Type are auto-filled. Since this is a display only field, enter the code in the Carrier Name field and press the Enter key to populate a 1 to 1 match.

8.1.3   Type
Type of Insurance Coverage.   When Carrier is selected, Code and Type are auto filled. Current carrier types are types which may be populated when adding a new coverage. Legacy carrier types are types which are associated with older coverages but will not be populated when adding a new coverage. Type is a display only field which is tied directly to the carrier and cannot be modified. Previously this field appeared editable in CMS Net Legacy but it did not retain the user selection after exiting the screen.

Current Carrier Types are: EPO, HMO, INDEMNITY, MAP, MPO, MSP, PPO, OTHER, PAC

Legacy Carrier Types: TPD, TPI, TPL, TPM, TPO, TPP, TPV, PDP, POS

Note: This was a text entry field in CMS Legacy, but is a display only field on the Web.

8.1.4   Carrier Address
When a carrier is selected, the street address associated with the health insurance carrier is displayed.

8.1.5   Phone
When a carrier is selected, the phone number associated with the health insurance carrier is displayed.

8.1.6   Scope
When a carrier is selected, the scope options associated with this carrier are auto-populated. Previously this field appeared editable in CMS Net Legacy but it did not retain the user selection after exiting the screen. A legend is displayed when the cursor is placed over the indicated scope for selected carrier. Possible scope options are:

O: Hospital Outpatient, I: Hospital Inpatient, M: Medical & Allied Services or any combination of these codes, D:Dental, L:Long-term Care, P:Medi-Cal Prescription Drug, R:MMA Part D Prescription Drugs, V:Vision Care

8.1.7   Policy
Carrier's Policy number issued to selected client. *Required field.*

8.1.8   Start Date
Date this coverage went into effect for selected client. *Required field.*

8.1.9   Stop Date
Date this coverage ended for selected client.

8.1.10   Deductible
Enter the deductible required for this policy. Only whole dollar amounts in numeric digits, are allowed in this field.

8.1.11   Annual Max Benefit
Enter the annual max benefit amount allowed for this policy. Only whole dollar amounts in numeric digits, are allowed in this field. This field was previously named Max Benefit in CMS Net Legacy.

8.1.12   Out-of-Pocket
Out-of-Pocket amount up to 10 numeric characters.

8.1.13   Excluded Benefits
Benefits excluded from coverage.   Click the Select button to add excluded benefits.

8.2   Policy Holder Information Section

8.2.1   Last Name
Policy holder's last name (alphanumeric). *Required field.*

8.2.2   First Name
Policy holder's first name. *Required field.*

8.2.3   MI
Policy holder's middle initial.

8.2.4   Phone
Policy holder's phone number.

8.2.5   Ext
Policy holder's phone number extension.

8.2.6   Relationship
Client's relationship to the policy holder is selectable from a dropdown list. Available selections are: Dependent, Other, Self, Spouse. *Required field.*

8.2.7   Policy Paid By
Policy Paid By is selectable from a dropdown list. Available selections are: Employer, Employer/Self, HIPR Program, Other, Self. *GHPP Only.*

8.2.8   Quarterly Premium

Enter the quarterly premium payment to the insurance plan. GHPP On*ly.*

8.2.9   Comments/Case Notes

Entering a Comment and saving will create a Case Note. Maximum 15,000 alphanumeric characters. Number of characters remaining is indicated below the comment box, on the right side. Typing will stop when zero characters remain.

8.2.10   Created By

This display only field is new to CMS Net Web. This shows the creator or "owner" of the coverage record. Only coverage records created by CMS can be edited. Coverages created by of MEDS cannot be edited, except to add comments to the coverage record.

8.2.11   Last Updated By

Indicates last user to update this record.

8.2.12   Last Updated On

Date of last record update.

8.3   Navigation Buttons

8.3.1   Find Button

Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from. A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

8.3.2   Select Button

This button is used to select Excluded Benefits.

8.3.3   Back Button

The back button navigates back to the search coverage screen.

8.3.4   Add Coverage Button

Add a new Insurance Coverage record for the selected client. The coverage detail section is cleared and any selection in the Coverage list is removed.

8.3.5   Save Button

Save any updates made to the selected Coverage record. Save is not allowed if the Carrier is inactive and start date or end date is after the inactive date.

8.3.6   Reset Button

Clears user entries from screen.

8.4 Adding a New Coverage Record for a Client

Users with the proper security role have the ability to add new coverages for clients using the Add Coverage button.

Figure 8-2 - Add Coverage Screen

1. In CMS Net Web, go to Coverage and select a client then click the Continue button to enter the Coverage screens.
2. Select Add Coverage button. Editable fields are cleared of any data.
3. Enter in the Carrier Name and press the Enter key or click the Find button next to the Carrier Name field.   When a direct match is found upon pressing Enter, the selection is populated on the Coverage Details section. If the Find button is clicked or there are multiple matches, a popup is displayed and the Carrier Name may be clicked to select it.   The carrier address and phone number will be automatically populated when the carrier is selected.
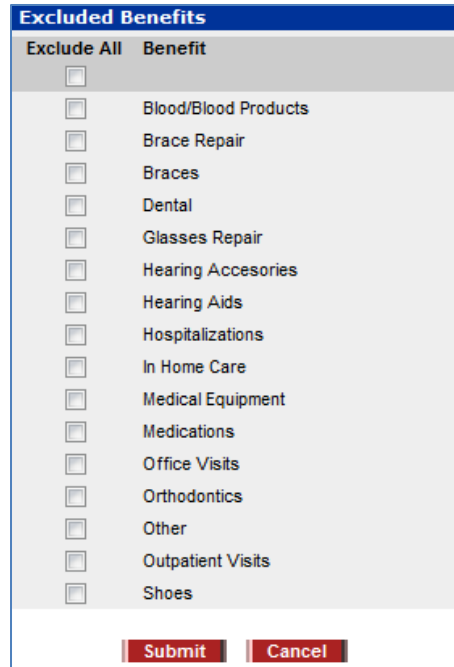
Carrier Name/ Address	Carrier Code	Type	County
KAISER PERMANENTE INSURANCE CO PO Box 261155 Plano TX 75026	K101	PPO	
KAISER SENIOR ADVANTAGE 393 Walnut St Fl 3 PO Box 24010 Oakland CA 94623-1010	K994	MAP	
KAISER SENIOR ADVANTAGE 393 Walnut St Fl 3 PO Box 24010 Oakland CA 94623-1010	K995	MAP	
Kaiser Permanente Hp Snf Northern And Southern Cal Region Oakland CA 94604	K996	other	
KAISER FOUNDATION HP, INC. 393 E Walnut St Fl 3 PO Box 7004 Downey CA 90242	K997	MAP	
KAISER PERMANENTE HEALTH PLAN Northern & Southern California Region PO Box 12923 Oakland CA 94604	K998	HMO	
KAISER SENIOR ADVANTAGE 393 E Walnut St Fl 3 PO Box 24010 Oakland CA 94623	K999	MAP	
KAISER PERMANENTE MEDICAL GROU Several	Z003	other	
Kaiser Foundation Health Plan Carolyn Graham 1800 Harrison St, 9th Fl Oakland CA 94612	_087	MCMCP	

Figure 8-3 - Carrier Name Find Popup

4. Enter policy number for coverage. *Required field.*
5. Enter the start date for the insurance policy coverage. *Required field.*
6. Enter the Annual Out-of-Pocket amount, if known.
7. Enter the Annual Max Benefit amount, it known.
8. If applicable, select the Excluded Benefits Add button to select excluded benefits from the selection list. Select the benefits you wish to exclude from the coverage records and click Submit button. You will be returned to the coverage record and the selections will be displayed in the Excluded Benefits field.

Note: Once Excluded Benefits have been added to the Excluded Benefits section, you must again use the Select button to remove any benefits that you may have entered in error. Hitting the Backspace key on your keyboard to try and edit this field will result in your browser leaving this screen without saving the changes.

Figure 8-4 - Excluded Benefits Popup

9. Enter the policy holder's last name (alphanumeric). *Required field.*

10. Enter the policy holder's first name. *Required field.*

11. Enter the policy holder's middle initial.

12. Enter the policy holder's phone number.

13. Select the Client's relationship to the policy holder from a dropdown list. Available selections are: Dependent, Other, Self, Spouse. Required field.

14. Select the Policy Paid By from a dropdown list. Available selections are: Employer, Employer/Self, HIPR Program, Other, Self. Note: This field was always visible in Legacy. On the Web, it will only be visible for GHPP cases.

15. Enter the quarterly premium payment to the insurance plan. *GHPP Only.*

Insurance coverage information for client: Test,Coverage

Required fields are marked in *

⊞ CLIENT INFORMATION			Face Sheet
Client Name: Test,Coverage	Case Number: 9877010	Date Of Birth: 11/20/2000	

INSURANCE COVERAGE

Select		Carrier Name	Code	Start Date	Stop Date	Policy Number	Last Update	Remove
○	⊞	AETNA PPO	A794	03/05/2013		AETNAPPOTEST287	01/08/2014	✕
○	⊞	BLUE CROSS OF CALIFORNIA	B042	01/01/2014		123456789 R	01/10/2014	✕
○		LIFEWISE	P535	01/03/2010		LWWWW	01/10/2014	✕

COVERAGE DETAILS

Carrier Name: * KAISER PERMANENTE HEALTH PLAN   [Find]   Code: K998   Type: HMO

Carrier Address: Northern & Southern California Region
PO Box 12923
Oakland, CA 94604   Phone: (858) 614-3054   Scope: OIMP

Policy #: * KPHP5757575   Start Date: * 11/01/2013   Stop Date:

Deductible: 20   Annual Max Benefit: Out-of-Pocket:

Excluded Benefits: Dental   [Add]

Policy Holder Information

Last Name: * Test   First Name: * Tina   MI:

Phone: (111) 223 - 333   Relationship: * Other ▼
Ext:

Comments: Mother is policy holder.

No of Characters Left : 14976

Last Updated By: Last Updated On:

[Back] [Add Coverage] [Save] [Reset]

Figure 8-5 - Completed Add Coverage Screen

16. Select Save. User's name and timestamp will be displayed in the Last Updated By/On fields if the save was successful.

Figure 8-6 - Add Coverage Screen (Saved)

8.5 Reasons why a Coverage Record Cannot be Created or Saved

Reasons why a coverage record cannot be created or saved are:

- If the patient is 21 years or older and is not in GHPP, no new coverage will be created.

- If this is a duplicate of an existing coverage for the same patient record, no new coverage will be created.

- When saving, the records may merge with existing records if the dates overlap.

- If trying to add coverage for a case marked as Duplicate in registration, you will receive an error saying "Registration for this patient record is marked as duplicate".

- If adding a Stop Date less than 2 days after the Start Date, you will receive an error saying "This action will delete the coverage because start date and stop date difference is less than two dates. Are you sure you want to delete this coverage?" A stop date of less than 2 days after the start date will flag this record for deletion at MEDS when the daily transaction file is submitted.

Figure 8-7 - Add Coverage Screen (Duplicate)

8.6   Editing an existing Coverage Record for a Client

You may edit the coverage records displayed here, if allowed by your security role.

1. Select a coverage record.

2. Modify any editable field.
3. Select Save button. When saving, the records may merge with existing records if the dates overlap.

Figure 8-8 - Edit Existing Coverage Screen (Edit)

Figure 8-9 - Edit Existing Coverage Screen (Saved)

8.7 Adding a Stop Date to a Coverage Record

In the lower left corner of the Coverage screen, the Created By field indicates whether you are viewing a 'CMS' or 'MEDS' originating record. We can only modify CMS created records. If the Created By indicator is MEDS, we cannot stop date it. If the record was created by CMS, we can make any necessary modifications. This is not to be confused with the source field in MEDS, which indicates who last updated the record.

Before insurance was moved to the web, CMS Net Legacy allowed you to enter a stop date for MEDS records, but when we attempted to update in MEDS, the transaction would fail. The next time a MEDS recon or inquiry was run, the record in CMS Net was reverted back to its original state. In the new system, we disabled any fields that will not be retained, to clarify which records are actually being updated.

To stop date an insurance coverage that is created by MEDS, please follow the instructions in This Computes! #343 to request OHC removal by TPL. After it is updated in MEDS, a MEDS Inquiry can be done in CMS Net to pull the stop date in.

8.8 Client's Coverage has End Date in MEDS but not in CMS Net. What do we do?

If a client has a coverage showing in CMS without an end date, but MEDS is showing an End Date for that same MCP, please email cmehdelp@dhcs.ca.gov with the Case number, coverage plan code and desired Stop Date, and we will update the record in CMS Net.

8.9 Editing the Coverage History for a Coverage

Coverage history may be modified if allowed by currently logged in user's security role.

1. Expand the coverage history for a carrier by clicking on the plus sign to the left of the name.

2. Select a coverage history. The Coverage Details will change to the selected coverage.

3. Modify any editable field.

4. Click the Save button. When saving, the records may merge with existing records if the dates overlap.

8.10 Deleting a Coverage Record for a Client

Coverage Records may be deleted if CCS is the source. If the record belongs to a source other than CCS, the option to delete will not be available and must be removed using the OHC Processing Center Forms located at:
OHC Processing Center Forms

Deleting a coverage record will remove it from CMS Net permanently. A daily transaction file is sent to Medi-Cal to remove it from MEDS as well. Coverages deleted in error may be re-entered by adding a new coverage.

If the system allows a coverage to be deleted by the currently logged in user, the Remove icon is displayed as an X in the far right column. The user is asked to confirm whether they wish to delete the coverage record. Once confirmed as "Yes", the page is submitted and the coverage is deleted and the user is routed back to the Insurance Screen.

Insurance coverage information for client: Test,Coverage

Required fields are marked in *

⊞	CLIENT INFORMATION				Face Sheet

Client Name:	Test,Coverage	Case Number:	9877010	Date Of Birth:	11/20/2000

INSURANCE COVERAGE

Select		Carrier Name	Code	Start Date	Stop Date	Policy Number	Last Update	Remove
○	⊞	AETNA PPO	A794	03/05/2013		AETNAPPOTEST287	01/08/2014	✕
○	⊞	BLUE CROSS OF CALIFORNIA	B042	01/01/2014		123456789 R	01/10/2014	✕
⦿		KAISER PERMANENTE HEALTH PLAN	K998	11/01/2013		KPHP5757575	01/14/2014	✕
○		LIFEWISE	P535	01/03/2010		LWWWW	01/10/2014	✕

COVERAGE DETAILS

Carrier Name:	* KAISER PERMANENTE HEALTH PLAN	Code: K998	Type: HMO
Carrier Address:	Northern & Southern California Region PO Box 12923 Oakland, CA 94604	Phone: (858) 614-3054	Scope: OIMP

Policy #:	* KPHP5757575	Start Date:	* 11/01/2013	Stop Date:	
Deductible:	20	Annual Max Benefit:	0	Out-of-Pocket:	0

Excluded Benefits: Dental   [Add]

Policy Holder Information

Last Name:	* Test	First Name:	* Tina	MI:	
Phone:	(111) 223 - 3333	Relationship:	* Other ▾		
Ext:					

Comments: Mother is policy holder. Verify spelling of mother's name.

No of Characters Left : 14941

Last Updated By:	Terrence Patrick Duperron	Last Updated On:	01/14/2014 08:53 AM

[Back] [Add Coverage] [Save] [Reset]

Figure 8-10 - Deleting a Coverage Screen

Insurance coverage information for client: Test,Coverage

Required fields are marked in *

⊞	CLIENT INFORMATION				Face Sheet

Client Name:	Test,Coverage	Case Number:	9877010	Date Of Birth:	11/20/2000

INSURANCE COVERAGE

Select		Carrier Name	Code	Start Date	Stop Date	Policy Number	Last Update	Remove
○	⊞	AETNA PPO	A794	03/05/2013		AETNAPPOTEST287	01/08/2014	✕
○	⊞	BLUE CROSS OF CALIFORNIA	B042	01/01/2014		123456789 R	01/10/2014	✕
○		KAISER PERMANENTE HEALTH PLAN	K998	11/01/2013		KPHP5757575	01/14/2014	✕
●		LIFEWISE	P535	01/03/2010		LWWWW	01/10/2014	✕

Message from webpage ⊠

❓ Coverage will be deleted permanently. Do you want to delete?

[OK] [Cancel]

COVERAGE DETAILS

Carrier Name: *	LIFEWISE	Type:	PPO
Carrier Address:	1133 N West Wall St PO Box 7709 Bend, OR 97708	Scope:	OIM
Policy #: *	LWWWW	Stop Date:	
Deductible:	50	Annual Max Benefit: 5000	Out-of-Pocket: 100
Excluded Benefits:	Braces, Brace Repair, Dental, Hearing Aids, In Home Care		**Add**

Policy Holder Information

Last Name: *	Test	First Name: * Lifewise	MI:
Phone:	(231) 123 - 3212	Relationship: * Spouse ▾	
Ext:	2543534543535		
Comments:	Test 245454		
		No of Characters Left :	14989

Last Updated By:	Terrence Patrick Duperron	Last Updated On:	01/10/2014 08:27 AM

[Back] [Add Coverage] [Save] [Reset]

Figure 8-11 - Deleting a Coverage Screen (Saved)

9   MEDI-CAL SCREEN

The Medi-Cal Coverage Screen stores the results from the MEDS Inquiry once it has been run.

9.1   Medi-Cal Screen – Basic View

Figure 9-1 - Medi-Cal Screen

9.1.1   Medi-Cal Denied

Selectable by radio button.   Available selections are: Yes, No.

9.1.2   Medi-Cal#

Medi-Cal number from Registration Module. A 14 digit dynamic number assigned by Medi-Cal which is calculated based on information derived from MEDS, such as county, aid code, etc. This number may change after a MEDS Inquiry or Recon is run.

9.1.3   SOC Amt

Medi-Cal Share of Cost. System displays the amount the client is required to pay .

9.1.4   Cert Day

Share-of-Cost Certification Day. System displays the day of the month that the share of medical costs was met.

9.1.5   Mother's Medi-Cal#

Mother's Medi-Cal number from Registration Module. *Display only.* This field can be accessed through the Mother's Medi-Cal # field in the Registration module. Data entered there will appear in the client header.

9.1.6   Known to CMS

Known to CMS indicator. Available statuses are:

0 – Remove CCS/GHPP from MEDS

1 – Known to CCS2 – Known to GHPP

3 – Known to CCS and GHPP

9.1.7   Notify CMS

System may display one of the following values to indicate if CMS Net would like to continue to receive notification about this client. Available statuses are:

Y – Notify CMS Net

N – Remove Notification

9.1.8   MGD Name

Managed Care Provider Name.

9.1.9   Start Date

Managed Care Plan Start Date.

9.1.10   Status

Managed Care Plan Status. System displays the text description and number of the Managed Care Plan status.

9.1.11   Stop Date

Managed Care Plan End Date. *Display Only.*

9.1.12   Plan Type

Managed Care Plan Type. System displays the text description of the plan type associated with the manage care provider.

9.1.13   Services Covered

Services covered associated with the managed care provider.

9.1.14   Comments/Case Notes

Comments entered will create a Case Note.   A separate Case Note is created for each coverage.   When a comment is modified, the existing Case Note for the corresponding coverage will be updated.   Alphanumeric characters.

9.2   Medi-Cal Aid Code Section

9.2.1   Primary AidCode

Primary Medi-Cal Aidcode.

9.2.2   Primary Eligibility

Primary Medi-Cal Eligibility data.

9.2.3   Primary Termination Date

Medi-Cal Termination Date. For each aid code, a termination date may apply. When applicable, the system displays the termination date.

9.2.4   Primary Termination Reason

Primary Medi-Cal Termination Reason.

9.2.5   Special Program 1 AidCode

Special Program 1 Aid Code data.

9.2.6   Special Program 1 Eligibility

Special Program 1 Eligibility data.

9.2.7   Special Program 1 Termination Date

Medi-Cal Special Program Termination Date. For each aid code, a termination date may apply. If applicable, the termination date will be displayed.

9.2.8   Special Program 1 Termination Reason

Medi-Cal Special Program Termination Reason..

9.2.9   Special Program 2 AidCode

Special Program 2 Aidcode data.

9.2.10   Special Program 2 Eligibility

Special Program 2 Eligibility data.

9.2.11   Special Program 2 Termination Date

Medi-Cal Termination Date. For each aid code, a termination date may apply. If applicable, the system displays the termination date.

9.2.12   Special Program 2 Termination Reason

Medi-Cal Termination Reason..

9.2.13   Special Program 3 AidCode

Special Program 3 Aid Code data.

9.2.14   Special Program 3 Eligibility

Special Program 3 Eligibility data.

9.2.15   Special Program 3 Termination Date

Medi-Cal Termination Date. For each aid code, a termination date may apply. If applicable, the system displays the termination date.

9.2.16   Special Program 3 Termination Reason

Medi-Cal Termination Reason. System displays a termination reason that applies to the termination reason.

9.2.17   Medicare

Medicare Program Status.

9.2.18   HIC#

HIC# data from MEDS.

9.2.19   Last Updated By

Name of person who last updated this record.

9.2.20   Last Updated On

Date of last record update.

9.3   Navigation Buttons

9.3.1   Save Button

Validates required fields and saves changes.

9.3.2   Back Button

Cancels changes and returns user to prior screen.

9.4 Editing an Existing Coverage Record for a Client

You may edit the existing coverage by adding a Medi-Cal Denied flag or adding Comments.

1. If desired, select the Medi-Cal Denied radio button.   Available selections are: Yes, No.
2. You may enter alphanumeric characters in the Comments/Case Notes field.
3. Select the Save button. Updates are saved successfully.

Figure 9-2 - Edit Medi-Cal Record

10   THIRD PARTY LIABILITY SCREEN

Third Party Liability is used to add / edit worker's compensation and accidental insurance coverage for existing CCS / GHPP patients. Coverage may be accessed by any user who has client edit capability and whose security template allows access to the coverage module in the client's legal county.

10.1 Third Party Liability Screen – Basic View

Figure 10-1 - Third Party Liability Screen

10.1.1   Accident Type
Accident Type is selectable from a dropdown list. *Required Field.*
Available selections are:

Animal Attack (Dog Bite Etc.)

Car Accident

County Settlements*

Medical Malpractice

Motor Vehicle Accident (Other Than Car)

Other Liability

Premises Liability (Other Than Slip + Fall)

Private Settlements *

Product Liability

Slip and Fall

Victim of Violence

Workers Compensation Claim

Note: New selections for Private Settlements and County Settlements have been added. * These selections are not sent to MEDS.

10.1.2   Accident Date
Date accident occurred. *Required field.*

10.1.3   Close Date
Date claim was closed.

10.1.4   Comments/Case Notes
Entering a comment will create a corresponding Case Note. *Alphanumeric.*

10.1.5   Last Updated By
Name of person who last updated this record.

10.1.6   Last Updated On
Date of last record update.

10.2 Add/Edit Workers Compensation Fields
Note: The following will appear when an Accident Type of Worker's Compensation is selected from the drop down list.

Note: An asterisk (*) indicates a new field addition to CMS Web.

10.2.1   Worker's Comp
Enter Worker's Comp #. System will accept "Ask Client" as an entry. *Required field for Worker's Compensation claim.*

10.2.2   WC Carrier Name *
WC Carrier Name is selectable from a lookup list. Selections are sourced from the California Department of Insurance carrier list.

10.2.3   Code
System displays the Carrier Code associated with the insurance carrier. When Carrier is selected, Code and Type are auto-filled.

10.2.4   Type

Type of Insurance Coverage.   When Carrier is selected, Code and Type are auto filled. *Display Only.*

Available selections are: EPO, HMO, INDEMNITY, OTHER, PPO, TPD, TPI, TPL, TPM, TPO, TPP, TPV, PDP, MAP, MPO, MSP, POS, PAC

10.2.5   WC Carrier Address *

Enter WC Carrier Contact Address.

10.2.6   Phone *

Enter WC Carrier Contact Phone.

10.2.7   Scope

Select the scope of coverage (you can select more than one) for the insurance policy from the pick list. *Display Only.*

Possible scope options are:
O: Hospital Outpatient, I: Hospital Inpatient, M: Medical & Allied Services or any combination of these codes, D:Dental, L:Long-term Care, P:Medi-Cal Prescription Drug, R:MMA Part D Prescription Drugs, V:Vision Care

10.3 Add/Edit Liability Fields

Note: The following will appear when any Accident Type other than Worker's Compensation is selected from the drop down list.

Note: An asterisk (*) indicates a new field addition to CMS Web.

10.3.1   Policy

Enter Policy #. *Required for non-Worker's Compensation claim.*

10.3.2   Attorney Name *

Enter Attorney Name.

10.3.3   Attorney Address Line 1 *

Attorney Address can be entered for selected claim.

10.3.4   Attorney Address Line 2 *

Attorney Address can be entered for selected claim.

10.3.5   City *

Attorney Address can be entered for selected claim.

10.3.6   State *

Attorney Address can be entered for selected claim.

10.3.7   Zip *
Attorney Address can be entered for selected claim.

10.3.8   Attorney Phone *
Enter Attorney Phone Number.

10.3.9   Ext *
Enter Attorney Phone extension.

10.3.10 Email Address *
Enter Attorney Email.

10.3.11 Last Name *
Enter Last Name of person requesting the subpoena.

10.3.12 First Name *
Enter First Name of person requesting the subpoena.

10.3.13 Receipt Date *
Enter Subpoena Receipt Date for selected claim.

10.3.14 Consent To Release Verified? *
Selectable by radio button.   Available selections are: Yes, No.

10.3.15 Claim Detail Report *
Selectable by radio button.   Available selections are: Yes, No.

10.4 Navigation Buttons

10.4.1   Find Button
Find buttons may appear to the right of fields that have a multi-select list which is dynamic, and/or too lengthy to display in a drop-down menu. These fields allow a user to enter search criteria and click the Find button to display a list of results to choose from.   A user can then make a selection and search for referrals based on this criteria. These fields are sometimes used in combination with other criteria.

10.4.2   Back Button
Cancels changes and returns user to prior screen.

10.4.3   Add Liability
Validates required fields and saves new liability record.

10.4.4   Save Button

Validates required fields and saves changes.

10.5 Adding a New Liability Record for a Client

Liability information may be recorded in CMS Net through the Third Party Liability tab, located within the Coverage module.

1. Go to Coverage module and select client then click Continue button and click on the Third Party Liability tab.

Figure 10-2 - Add Liability Screen

2. Click the Add Liability button to record a new liability.

3. Select the appropriate Accident Type from the drop down list.

Figure 10-3 - Select Accident Type

4. A form will be displayed that corresponds to the selected Accident Type.

Figure 10-4 - Add Liability Screen (New)

5. Fill out any required fields as well as any optional fields that are desired.

Third Party Liability coverage information for client: Test,Liability

Required fields are marked in *

	CLIENT INFORMATION					Face Sheet
Client Name:	Test,Liability	Case Number:	9877022	Date Of Birth:	07/15/1999	

THIRD PARTY LIABILITY COVERAGE

Select	Accident Type	Accident Date	Last Update	Remove
○	Workers Compensation Claim	12/01/2013	01/14/2014	✕
●	Animal Attack (Dog Bite Etc)	11/01/2013	01/14/2014	✕

ACCIDENT DETAILS

Accident Type: * Animal Attack (Dog Bite Etc)   Accident Date: * 11/01/2013   Close Date: [ ]

Policy #: * AADBETEST555

Attorney Name: Yayo Portillo

Attorney Address Line1: 6545 Cowell Blvd

Address Line2: [ ]

City: El Macero   State: CA   Zip: 95618   **Find**

Phone: (111) 222 - 3333 Ext: [ ]   Email Address: yayoportillo@email.com

Subpoena Requested By: Last Name: Catlett   First Name: Bo   Receipt Date: [ ]

Consent to Release Verified: ● Yes ○ No   Claim Detail Report: ● Yes ○ No

Service Begin Date: 11/12/2013   Service End Date: [ ]

Comments: Dog bite on right hand.

No of Characters Left : 14977

Last Updated By: Terrence Patrick Duperron   Last Updated On: 01/14/2014 10:38 AM

Back   **Add Liability**   **Save**   **Reset**

Figure 10-5 - Add Liability Screen (Complete)

6. Select the Save button to validate fields and save the record. A message will appear indicating that the save was successful.

- Coverage saved successfully.

| Insurance | Medi-Cal | **Third Party Liability** | Healthy Families | CCS Pilot Project |

Third Party Liability coverage information for client: Test,Liability

Required fields are marked in *

⊞ CLIENT INFORMATION			Face Sheet
Client Name: Test,Liability	Case Number: 9877022	Date Of Birth: 07/15/1999	

THIRD PARTY LIABILITY COVERAGE

Select	Accident Type	Accident Date	Last Update	Remove
◉	Animal Attack (Dog Bite Etc)	11/01/2013	01/14/2014	✕

ACCIDENT DETAILS

Accident Type: * Animal Attack (Dog Bite Etc) ▾   Accident Date: * 11/01/2013   Close Date:

Policy #: * AADBETEST555

Attorney Name: Yayo Portillo

Attorney Address Line1: 6545 Cowell Blvd.

Address Line2:

City: El Macero   State: CA   Zip: 95618   Find

Phone: (111) 222 - 3333   Ext: Email Address: bocatlett@email.com

Subpoena Requested By: Last Name: First Name: Receipt Date:

Last Name: Catlett   First Name: Bo

Consent to Release Verified: ◉ Yes ○ No   Claim Detail Report: ◉ Yes ○ No

Service Begin Date: 11/12/2013   Service End Date:

Comments: Dog bite on right hand.

No of Characters Left : 14977

Last Updated By: Terrence Patrick Duperron   Last Updated On: 01/14/2014 10:28 AM

Back   Add Liability   Save   Reset

Figure 10-6 - Add Liability Screen (Saved)

10.6 Adding a New Workers Compensation Record for a Client

Follow the steps below to edit an existing liability for a client.

1. Go to Coverage module and select client then click Continue button and click on the Third Party Liability tab.

2. Click the Add Liability button to record a new worker's compensation claim.

Third Party Liability coverage information for client: Test,Liability

Required fields are marked in *

⊞	CLIENT INFORMATION					Face Sheet
Client Name:	Test,Liability	Case Number:	9877022	Date Of Birth:	07/15/1999	

THIRD PARTY LIABILITY COVERAGE

Select	Accident Type	Accident Date	Last Update	Remove

ACCIDENT DETAILS

Accident Type: * Select ▼   Accident Date: *   Close Date:

Comments:

No of Characters Left : 15000

Last Updated By: Last Updated On:

Back   **Add Liability**   **Save**   **Reset**

Figure 10-7 - Add Workers Compensation Screen

3. Select Workers Compensation from the Accident Type drop down list.

ACCIDENT DETAILS

Accident Type: * Select ▼

Select
Animal Attack (Dog Bite Etc)
Car Accident
County Settlements
Medical Malpractice
Motor Vehicle Accident (Other Than Car)
Other Liability
Premises Liability (Other Than Slip+Fall)
Private Settlements
Product Liability
Slip And Fall
Victim Of Violence
Workers Compensation Claim

Comments:

Last Updated By:

Figure 10-8 - Select Accident Type

Third Party Liability coverage information for client: Test,Liability
Required fields are marked in *

⊞	CLIENT INFORMATION					Face Sheet
Client Name:	Test,Liability	Case Number:	9877022	Date Of Birth:	07/15/1999	

THIRD PARTY LIABILITY COVERAGE

Select	Accident Type	Accident Date	Last Update	Remove

ACCIDENT DETAILS

Accident Type: * [Workers Compensation Claim ▼]   Accident Date: * [   ]   Close Date: [   ]

Worker's Comp #: * [   ]

WC Carrier Name: [   ] [Find]

WC Carrier Address: Phone:

Comments: [   ]

No of Characters Left : [15000]

Last Updated By: Last Updated On:

[Back] [Add Liability] [Save] [Reset]

Figure 10-9 - Add Workers Compensation Screen (New)

4. Fill out any required fields as well as any optional fields that are desired.

5. Enter the Workers Compensation Carrier name and click the Find button. A selection list will appear.

Carrier Name/ Address	Carrier Code	Type	Scope	County
CARE WEST INSURANCE COMPANY 2521 Warren Drive Suite B Rocklin CA 95677	[006	WCC		
CHURCH MUTUAL INSURANCE COMPANY 3000 Schuster Lane Merrill WI 54452	[007	WCC		
CHARTIS PROPERTY CASUALTY COMPANY 180 Maiden Lane New York NY 10038	[017	WCC		
COMMERCE AND INDUSTRY INSURANCE COMPANY 175 Water Street 18th Floor New York NY 10038	[018	WCC		
CALIFORNIA INSURANCE COMPANY 10805 Old Mill Road Omaha NE 68154	[024	WCC		

Figure 10-10 - Select Workers Compensation Carrier

6. Click on the Carrier Name to select it. The pop-up window will disappear and the carrier information will be inserted into the Accident Details form.

7. Enter any desired comments. A Case Note will be created corresponding to this claim.

Figure 10-11 - Add Workers Compensation Screen (Edit)

8. Click the Save button to validate fields and save the record. A message will appear indicating that the save was successful.

Figure 10-12 - Add Workers Compensation Screen (Complete)

10.7 Editing an existing Liability Record for a Client

Follow the steps below to edit an existing liability for a client.

1. Select liability by clicking on the radio button to the right of the Accident Type in list of coverages.

2. Modify any editable fields as needed.

3. Click Save button.

10.8 Editing an existing Workers Compensation record for a Client

Follow the steps below to edit an existing liability for a client.

1. Select liability by clicking on the radio button to the right of the Accident Type in list of coverages.

2. Modify any editable fields as needed.

3. Click Save button.

10.9 Editing the Liability History for a Liability

Follow the steps below to edit a liability history for a client.

1. Expand the + sign to expand the coverage history, or select the historical record.

Figure 10-13 - Expand Liability History

Figure 10-14 - Expand Liability History (Expanded)

2. Select the historical record you want to modify by clicking on the radio button to the right of the Accident Type in list of coverages. Corresponding information is displayed in Accident Details.

Figure 10-15 - Expand Liability History Details

3. Modify any editable fields as needed.

4. Click Save button.

10.10 Editing the Workers Compensation History for a liability

Follow the steps below to edit an existing liability for a client.

1. Expand the plus (+) sign to expand the coverage history, or select the historical record.

Figure 10-16 - Expand Worker's Comp History

2. Select the historical record you want to modify.

Figure 10-17 - Expand Worker's Comp History (Expanded)

3. Modify any editable field.

4. Click Save button.

10.11 Deleting a Liability record for a Client

Deleting a liability record will remove it from CMS Net permanently. A daily transaction file is sent to Medi-Cal to remove it from MEDS as well. Records deleted in error may be re-entered by adding a new liability.

If the system allows a liability record to be deleted by the currently logged in user, the Remove icon is displayed as an X in the far right column. The user is asked to confirm whether they wish to delete the liability record. Once confirmed as "Yes", the page is submitted and the coverage is deleted and the user is routed back to the Insurance Screen.

Figure 10-19 - Deleting Liability Record

10.12 Deleting a Workers Compensation Record for a Client

The Remove icon is displayed in the far right column of list of coverages if the record may be deleted by the current user. A pop-up window asks the user to confirm the request to delete the coverage record. Once confirmed, the coverage is permanently deleted and the user is navigated back to the Insurance Screen.

Third Party Liability coverage information for client: Test,Liability

Required fields are marked in *

	CLIENT INFORMATION					Face Sheet

Client Name: Test,Liability   Case Number: 9877022   Date Of Birth: 07/15/1999

THIRD PARTY LIABILITY COVERAGE

Select	Accident Type	Accident Date	Last Update	Remove
◉	Workers Compensation Claim	12/01/2013	01/14/2014	✕

Message from webpage   ⌧

❓ Coverage will be deleted permanently. Do you want to delete?

OK   Cancel

ACCIDENT DETAILS

Accident Type: * Workers Compensation Claim ▼   Accident Date: * 12/01/2013   Close Date: [ ]

Worker's Comp #: * WCCTEST5456

WC Carrier Name: CALIFORNIA INSURANCE COMPANY   Find   Code: [024   Type: WCC

WC Carrier Address: 10805 Old Mill Road
Omaha, NE 68154   Phone: (402) 827-3424

Comments: Caught right hand in paper cutter.

No of Characters Left : 14966

Last Updated By: Terrence Patrick Duperron   Last Updated On: 01/14/2014 10:35 AM

Back   Add Liability   Save   Reset

Figure 10-20 - Deleting Worker's Comp Record

11 HEALTHY FAMILIES SCREEN

The Healthy Families Screen stores the results from the MEDS Inquiry once it has been run.

11.1 Healthy Families Screen – Basic View

Healthy Families Coverage information for client: Test,Coverage

⊞	**CLIENT INFORMATION**					**Face Sheet**

Client Name: Test,Coverage **Case Number:** 9877010 **Date Of Birth:** 11/20/2000

MEDI-CAL ELIGIBILITY INFORMATION

Income Over 40K?: ○ Yes ◉ No

Healthy Families Day In: **Day Out:** **SP-Aidcode:** 3N **SP-Elig:** 301

Select	Carrier Name	Start Date	Stop Date	Policy Number	Last Update
○	HF ANTHEM BLUE CROSS HMO	09/20/2003	11/30/2010	Ask Client	01/03/2014
○	HF DELTA DENTAL	09/20/2003	10/31/2013	Ask Client	01/03/2014
○	HF VISION SERVICE PLAN	09/20/2003	10/31/2013	Ask Client	01/03/2014

COVERAGE DETAILS

Carrier: **Code:**

Address 1: **Start:** **Stop:**

Address 2: **Policy#:**

City: **St:** **Zip:** **Ph #:** **Scope:**

Contact Person:

Comments:

No of Characters Left : 15000

Last Updated By: **Last Updated On:**

[Save] [Back]

Figure 11-1 - Healthy Families Screen

11.1.1 Income Over $40K

Selectable by radio button. Available selections are: Yes, No. Default selection is no. *Required field.*

11.1.2 Healthy Families Day In

Healthy Families Day In. System displays the date (of the month) that Healthy Families eligibility began. For example: "10" would mean the 10th of the month.

11.1.3   Day Out

Healthy Families Day Out. System displays the date (of the month) that Healthy Families eligibility ended. For example: "20" would mean the 20th of the month.

11.1.4   SP-Aidcode

Aid code for Healthy Families coverage. System displays the aid code for insurance policy coverage information.

11.1.5   SP-Elig

Eligibility for Healthy Families program. System displays the eligibility for insurance policy coverage information.

11.1.6   Carrier

System displays the Carrier name.

11.1.7   Code

Carrier code. System displays the code associated with the insurance carrier.

11.1.8   Address1

Health Insurance Carrier Street 1 Address. System displays the first line of the street address associated with the health insurance carrier.

11.1.9   Start

Policy start date. System displays the start date for the insurance policy coverage. *Display Only.*

11.1.10   Stop

Policy stop date. System displays the end date for the insurance policy coverage.

Note: This was a text entry field in CMS Legacy, but is a display only field on the Web.

11.1.11   Address2

Health Insurance Carrier Street 2 Address. System displays the first line of the street address associated with the health insurance carrier.

11.1.12   Policy#

Health insurance policy number. System displays the health insurance policy number.

Note: This was a text entry field in CMS Legacy, but is a display only field on the Web.

11.1.13   City

Health Insurance Carrier City. System displays the city associated with the health insurance carrier.

11.1.14 St

Health Insurance Carrier State. System displays the state associated with the health insurance carrier.

11.1.15 ZIP

Health insurance carrier zip. System displays the zip code associated with the health insurance carrier.

11.1.16 Ph

Health insurance carrier phone number. System displays the phone number associated with the health insurance carrier.

11.1.17 Scope

Scope of coverage. System displays the scope of coverage for the insurance policy.

Possible scope options are:

O: Hospital Outpatient, I: Hospital Inpatient, M: Medical & Allied Services or any combination of these codes, D:Dental, L:Long-term Care, P:Medi-Cal Prescription Drug, R:MMA Part D Prescription Drugs, V:Vision Care

11.1.18 Contact Person

Healthy Families Carrier Contact Person Name. System displays the Healthy Families contact person.

11.1.19 Comments

Entering a Comment and saving will create a Case Note. *Alphanumeric*.

11.1.20 No of Characters Left

The count of remaining characters. Count decreases while typing.

11.1.21 Last Updated By

Name of last person who updated this record.

11.1.22 Last Updated On

Date of last record update.

11.2 Navigation Buttons

11.2.1 Save Button

Validates required fields and saves changes.

11.2.2 Back Button

Cancels changes and returns user to prior screen.

11.3 Editing an Existing Healthy Families Record for a Client

Follow the steps below to edit an existing liability for a client.

1. Modify any editable field.

2. Click Save

11.4 Editing an Existing Healthy Families History for a Client

Follow the steps below to edit an existing coverage for a client.

1. Expand the + sign to expand the coverage history, or select the historical record.

2. Select the historical record you want to modify.

3. Modify any editable field.

4. Click Save.

11.5 Possible Issues with Reopening a Closed Healthy Families Case

It is possible that when reopening a previously closed Healthy Families case, the Healthy Families coverage will show as Active in CMS Net, but will have an end date in MEDS. In this case, the user may run MEDS Inquiry manually to update the record.

If the plan end date is still missing after manually running the MEDS Inquiry, user must contact the CMS Help Desk to have us end date plan.

12   CCS PILOT PROJECT SCREEN

CCS Pilot Project screen is used for demonstration projects aimed at improving client's quality of care.

12.1 CCS Pilot Project Screen – Basic View

Figure 12-1 - CCS Pilot Project Screen

12.1.1   Medi-Cal

Medi-Cal number from Registration Module. A 14 digit dynamic number assigned by Medi-Cal which is calculated based on information derived from MEDS, such as county, aid code, etc. This number may change after a MEDS Inquiry or Recon is run.

12.1.2   SOC Amt

Medi-Cal Share-of-Cost.   System displays the amount the client is required to pay.

12.1.3   Cert Date

Share of Cost Certification Date. System displays the day of the month that the share of medical costs was met.

12.1.4   Primary AidCode
Primary Aid Code.

12.1.5   Special Program 1
Special Program 1 Aid Code data.

12.1.6   Special Program 2
Special Program 2 Aid Code data.

12.1.7   Special Program 3
Special Program 3 Aid Code data.

12.1.8   Eligibility Primary
Primary Eligibility data.

12.1.9   Special Program 1
Special Program 1 Eligibility data.

12.1.10   Special Program 2
Special Program 2 Eligibility data.

12.1.11   Special Program 3
Special Program 3 Eligibility data.

12.1.12   HCP Name
Health Care Plan Name data from Carrier Master File.

12.1.13   Enrollment Date
System generated date after successful enrollment.

12.1.14   Disenrollment Date
System generated date comes from Disenrollment Button save action.

12.1.15   Comments/Case Notes
Entering a Comment and saving will create a Case Note. Alphanumeric.

12.1.16   Last Updated By
Name of person who last updated this record.

12.1.17   Last Updated On
Date of last record update.

12.2 Navigation Buttons

12.2.1 Action Menu

This menu has different options available depending on the current status of the client.

Enroll Action

Validates required fields and enrolls client. Available if client is eligible and not enrolled in program.

Disenroll Action

Validates required fields and disenrolls client. Available if eligible client is currently enrolled in program.

Delete Action

Validates required fields and deletes pending enrollment or pending disenrollment from the queue if pending changes have not been transmitted to MEDS.

Update Action

Saves comments typed in the Comments field.

12.2.2 Save Button

Saves changes and returns user to screen.

12.2.3 Back Button

Cancels changes and returns user to prior screen.

12.3 Enrolling a Client into the CCS Pilot Project

Follow the steps below to enroll a client into a CCS Pilot Project.

1. From the Coverage screen, search for and select the client you wish to enroll.
   Note: If client has an enrollment pending that has not been transmitted to MEDS, the message "(Pending Enrollment at MEDS)" will be displayed next to the Plan Name on the coverage selection list.
2. Click on the CCS Pilot Project tab.
3. Select Enroll under the Action menu.
4. Select the Health Care Plan from the dropdown list.
5. Enter any desired comments.
6. Select the Save button.

The Enroll action is visible only if the case meets the below conditions:

- There is no active enrollment.

- There is no pending enrollment (i.e.) transaction in the queue for ITSD.

- There is no pending disenrollment (i.e.) transaction in the queue for ITSD.

Additionally the Enroll function checks that the client resides in the County that participates in the Pilot and has an eligible aid code for enrollment.

Selecting Enroll will enroll the client to the selected carrier with the start date to be first of the current month if the transaction is not yet sent to ITSD. If the transaction is sent to ITSD, then the start date is set to the first day of the next month.

12.4 Disenrolling a Client from the CCS Pilot Project

Follow the steps below to disenroll a client from a CCS Pilot Project.

1. From the Coverage screen, search for and select the client you wish to enroll.
   Note: If client has an enrollment pending that has not been transmitted to MEDS, the message "(Pending Enrollment at MEDS)" will be displayed next to the Plan Name on the coverage selection list.
2. Click on the CCS Pilot Project tab.
3. Select the Disenroll from the Action menu.
4. Enter any desired comments.
5. Click the Save button.

The Disenroll action is visible only if the user has privileges to disenroll the client from the plan and the coverage record status is enrolled. The following conditions must also be met:

- There is an active enrollment

- There is no pending disenrollment (i.e.) transaction in the queue for ITSD

Selecting Disenroll will disenroll the client from the selected carrier with the stop date to be last of the current month if the transaction is not yet sent to ITSD. If the transaction is sent to ITSD, then the stop date is set to the last day of the next month.

12.5 Deleting a Pending Enrollment for a Client

Follow the steps below to delete a pending enrollment for a client.

1. Locate the client you wish to enroll.
   Note: If client has an enrollment pending that has not been transmitted to MEDS, the message "(Pending Enrollment at MEDS)" will be displayed next to the Plan Name on the coverage selection list.
2. Enter any desired comments.
3. Select Delete from the Action menu.
4. Select the Save button.

The Delete action is visible only if only if the coverage is currently disenrolled and the transaction is not sent to ITSD and the user has the appropriate privileges.

The coverage record is physically deleted along with its associated case note, the record is set to the previous state and the transaction is removed from the queue to ITSD.

12.6 Deleting a Pending Disenrollment for a Client

Follow the steps below to delete a pending disenrollment for a client.

1. From the Coverage screen, search for and select the client you wish to enroll.
   Note: If client has an enrollment pending that has not been transmitted to MEDS, the message "(Pending Disenrollment at MEDS)" will be displayed next to the Plan Name on the coverage selection list.
2. Click the CCS Pilot Project tab.
3. Enter any desired comments.
4. Select Delete from the Action menu.
5. Select the Save button.

The Delete action is visible only if only if the coverage is currently enrolled and the transaction is not sent to ITSD and the user has the appropriate privileges.

The coverage record is physically deleted along with its associated case note, the record is set to the previous state and the transaction is removed from the queue to ITSD.

12.7 Updating an Existing Coverage Record for a Client

Follow the steps below to update an existing coverage record for a client.

1. From the Coverage screen, search for and select the client you wish to enroll.
   Note: If client has an enrollment pending that has not been transmitted to MEDS, the message "(Pending Enrollment at MEDS)" will be displayed next to the Plan Name on the coverage selection list.
2. Click the CCS Pilot Project tab.
3. Enter any desired comments.
4. Select Update from the Action Menu.
5. Select the Save button.